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PTO/SB/52 (08-99)
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REISSUE APPLICATION DECLARATION BY THE ASSIGNEE		Docket Number (optional) P 1326 REI
I hereby declare that: My residence and post office address and citizenship are stated below next to my name. I am authorized to act on behalf of the following assignee: <u>Advanced Innoventions, Inc.</u> and the title of my position with said assignee is: <u>President & Treasurer</u> The entire title to the patent identified below is vested in said assignee.		
Name of Patentee(s): <u>Thomas E. Loftus</u>		
Patent Number <u>5,845,474</u>	Date of Patent Issued <u>December 8, 1998</u>	RECEIVED DEC 27 2000 TO 3600 MAIL ROOM
Title of Invention <u>Retrofit Chain Sickle Cutter</u>		
I believe said patentee(s) to be the original, first and sole/joint inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled <u>Retrofit Chain Sickle Cutter</u> the specification of which <input checked="" type="checkbox"/> is attached hereto. <input type="checkbox"/> was filed on _____ as reissue application number _____ / _____ and was amended on _____ (If applicable) I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.) <input type="checkbox"/> by reason of a defective specification or drawing. <input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent. <input type="checkbox"/> by reason of other errors. At least one error upon which reissue is based is described as follows: <u>Patentee claimed more or less than he had the right to claim in the patent by including, inter alia, a knife member that requires the knife member to have a substantially triangular portion with two sharp cutting edges.</u> [Attach additional sheets, if needed.] All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.		

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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(REISSUE APPLICATION DECLARATION BY THE ASSIGNEE, page 2)

Docket Number (Optional)

P 1326 REI

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)

Richard W. Young

Registration Number

30,706

Brian C. Rupp

35,665

Michael M. Geoffrey

41,775

Lynne D. Anderson

P46,412

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

Type Customer Number Here

Place Customer
Number Bar Code
Label Here

OR

☐ Firm or
Individual
Name

Brian C. Rupp

Address

Gardner, Carton & Douglas

Address

321 N. Clark Street, Suite 3300

City

Chicago

State

IL

Zip

60610

Country

USA

Telephone

312-644-3000

Fax

312-644-3381

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of person signing (given name, family name)

Signature

Date

March 30, 2000

Address of Assignee

Advanced Innovations, Inc. - 224 County Road, O-East, Ivesdale, IL 61851

Patentee

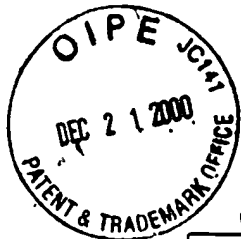
Citizenship

Residence/Post Office Address

Patentee

Citizenship

Residence/Post Office Address



REISSUE APPLICATION BY THE ASSIGNEE, OFFER TO SURRENDER PATENT		Docket Number (Optional) P 1326 REI
RECEIVED DEC 27 2000 TO 3600 MAIL ROOM		
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s): Loftus		
Patent Number 5,845,474	Date Patent Issued December 8, 1998	
Title of Invention Retrofit Chain Sickle Cutter		
Advanced Innoventions, Inc. _____ is the assignee of the entire interest in the original patent. I offer to surrender the original patent. <input checked="" type="checkbox"/> A certificate under 37 CFR 3.73(b) is attached. I am authorized to act on behalf of the assignee.		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.		
Name of assignee Advanced Innoventions, Inc.		
Signature of person signing for assignee <i>Thomas E. Loftus</i>	Date March 30, 2000	
Typed or printed name and title of person signing for assignee Thomas E. Loftus, President & Treasurer		